

215037335
60220

State of Nebraska
Investigator's Motor Vehicle Accident Report

Sheet 1 of 2

2	Total Number of Vehicles	Local No./ District 29	Agency Case No. B5-085187	HIT & RUN? <input type="radio"/> YES <input checked="" type="radio"/> NO	INVESTIGATION MADE AT SCENE? <input checked="" type="radio"/> YES <input type="radio"/> NO	L 1
A/1 01	DATE OF ACCIDENT	M M / D D / Y Y Y Y 09/14/2015		(In Military Time) TIME OF ACCIDENT 0942		STATE USE ONLY 09/14/2015
A/2	PLACE OF ACCIDENT	COUNTY Lancaster	CITY Lincoln	POLICE NOTIFIED 0943	PRIVATE PROPERTY? <input type="radio"/> YES <input checked="" type="radio"/> NO	
B 78	ROAD ON WHICH ACCIDENT OCCURRED	STREET/ HIGHWAY NO. N 27 S to T		ONE-WAY STREET? <input type="radio"/> YES <input checked="" type="radio"/> NO	LATITUDE	
C 1	DISTANCE FROM MILEPOST	FEET	N S E W OF MILEPOST	HIGHWAY NO.	LONGITUDE	
D 1	IF AT INTERSECTION			IF NOT AT INTERSECTION		
NAME OF INTERSECTING ROADWAY			<input checked="" type="radio"/> FEET <input type="radio"/> MILES	N S E W	OF NEAREST STREET, BRIDGE, RAILROAD CROSSING	
			6.00		X	27th
V1/M 14	IF ACCIDENT WAS OUTSIDE CITY LIMITS, INDICATE DISTANCE FROM NEAREST TOWN					
V2/M 01	MILES	N S E W	AND MILES	N S E W	OF NEAREST CITY OR TOWN	
E 2	R. WORK ZONE CODES	R1 R2 R3 R4	S. PEDESTRIAN CLASSIFICATION CODES	S1 S2 S3 S4 S5-a S5-b S6-a S6-b	DOES ACCIDENT INVOLVE DAMAGE TO STATE DEPT. OF ROADS' PROPERTY? <input type="radio"/> YES <input checked="" type="radio"/> NO	
VEHICLE NO. 1						
F 1	DRIVER LICENSE NO.	H13697166			STATE (Of License)	NE
V1/N 1	DRIVER	HECTOR SANCHEZ-DURAN			PHONE	402-601-8542
V2/N 1	DRIVER ADDRESS	CITY, STATE, ZIP			DATE OF BIRTH (MM / DD / YYYY)	12/09/1976
G 4	OWNER	HECTOR SANCHEZ			PHONE	402-601-8542
V1/O 1	VEHICLE	YEAR	MAKE	MODEL	BODY STYLE	COLOR
V2/O 1	VEHICLE ID NO. (VIN)	1GCFG25R0W1063739	Chevrolet	G20	Full size van	green
I 1	DRIVER LICENSE NO.	H13196701			STATE (Of License)	NE
V1/P 1	DRIVER	TAMISHA R LEE			PHONE	402-805-9117
V2/P 1	DRIVER ADDRESS	CITY, STATE, ZIP			DATE OF BIRTH (MM / DD / YYYY)	06/01/1984
J 01	OWNER	TAMISHA R LEE			PHONE	402-805-9117
V1/Q 4	VEHICLE	YEAR	MAKE	MODEL	BODY STYLE	COLOR
V2/Q 4	VEHICLE ID NO. (VIN)	1FAFP34N46W247708	Ford	fusion	4 door Sedan	silver / chrome
K 01	TOWED TO	TOWED BY			POLICY NO.	1706-5141-07-76-FPPA-NE
Complete this section for all injured persons (Complete a continuation report, if more than three were injured)						
VEH. #	NAME	ADDRESS			DATE OF BIRTH (MM / DD / YYYY)	1 2 3 4 5 SEX Seat Position Eject Body Region Injury Sev. Trans. M F
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THE FOLLOWING INFORMATION IS REQUIRED FOR ALL ACCIDENTS

INDICATE BY DIAGRAM WHAT HAPPENED

AGENCY CASE NO.
B5-085187

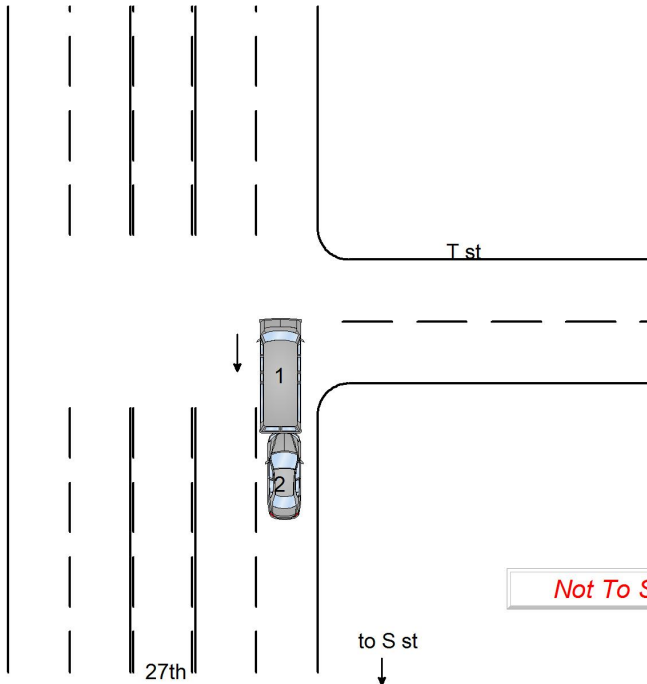


Indicate
North
by Arrow



6' W of E of
27th
12' S of S of T
st

27th = 64'



DESCRIPTION OF ACCIDENT BASED ON OFFICER'S INVESTIGATION

Driver #2 said she was stopped behind veh 1 N bound on 27. Traffic was backed up due to a stalled vehicle in the outside lane. Veh 1 backed up slightly and tapped the front of veh #2. The license plate got bent a little bit, but no other visible damage was observed. Driver 1 said there was a car in front of him that was trying to turn. He didn't feel there was enough space so he started backing up slightly and didn't see veh 2 behind him. There was no damage to veh 1.

PROPERTY	OBJECT DAMAGED	OWNER NAME	ADDRESS	PHONE	APPROX. COST OF DAMAGE \$
	OBJECT DAMAGED	OWNER NAME	ADDRESS	PHONE	APPROX. COST OF DAMAGE \$
WITNESSES	NAME	ADDRESS	PHONE		
	NAME	ADDRESS	PHONE		

VEHICLE MOVEMENT BEFORE COLLISION				POINT OF IMPACT AND MOST DAMAGED AREA (Enter numbers for each vehicle)				AIRBAG DEPLOYED VEHICLE 1		RESTRAINT USE VEHICLE 1		TOTAL OCCUPANTS			
VEH NO.	N	S	E	W	ROAD OR HIGHWAY NAME	VEHICLE 1	VEHICLE 2					VEH 1	1	VEH 2	1
1		X			27th										
2	X				N 27th										
1	02				06 Turning left	POINT OF IMPACT	05	POINT OF IMPACT	01	1 Deployed - front	1 None used - vehicle occupant	ALCOHOL TESTING	Driver No. 1	Driver No. 2	Pedestrian
2	11				08 Entering traffic lane	MOST DAMAGED AREA	00	MOST DAMAGED AREA	01	2 Deployed - side	2 Lap & shoulder belt used	ALCOHOL LEVEL TESTED	Y	Y	Y
					09 Leaving traffic lane					3 Deployed - both front/side	3 Shoulder belt only used	BAC LEVEL			
					10 Parked					4 Not deployed	4 Lap belt only used	ALCOHOL/ DRUGS SUSPECTED	1	1	
					11 Slowing or stopped in traffic					5 Child safety seat used	5 Child booster seat used		1	1	
					12 Other					6 DOT approved helmet used	6 Costume helmet used				
					01 Essentially straight ahead					7 Not applicable/ No airbag available	7 Restraint use unknown	1 Neither alcohol nor drugs suspected			
					02 Backing					8 Unknown		2 Yes - alcohol suspected			
					03 Changing lanes							3 Yes - drugs suspected			
					04 Overtaking/ Passing							4 Yes - alcohol & drugs suspected			
					05 Turning right							5 Unknown			
					13 Unknown										

OFFICER NO. 965	TROOP/ TEAM/ BEAT CE	DEPARTMENT Lincoln Police Department	Photographs taken? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
INVESTIGATOR NAME (Print or Type) Richard Fitch		INVESTIGATOR SIGNATURE Approved by Officer Richard Fitch	DATE OF REPORT 09/14/2015